APPLICATION FOR ELECTRICAL PERMIT OMULAS

COUNTY OF LOS ANGELES

DEPARTMENT OF COUNTY FINGINEED

| В | UILDING | AND SAFETY | DIVIS | SION | ER | | ADDRESS 944 W | . Rayl | an d | |
|--|-----------|----------------------|----------|---------------|----------|---|---|--------|----------|-----------------------|
| | | | | LOCALITY Torr | | | | | | |
| | | APPLICANT TO | | | | | NEAREST CROSS ST. | | | |
| OUT | LETS | | NO. | EACH \$ | | EE . | OWNER OR FIRM NAME D. Se | dmale | | |
| RECEPT |) | | ┼ | 3 | \$ | ļ | | • Rayl | 5ne | |
| LIGHT | TOTAL | FIRST 20 | <u> </u> | .25 | | - | | | | |
| SWITCH | <u> </u> | OVER 20 | ļ | .10 | | | PLAN CHECK | | TEL. N | none |
| LIGHTING |) TOTAL | FIRST 20 | | .25 | | | APPLICANT | | <u> </u> | |
| FIXTURES | <u> </u> | OVER 20 | | .10 | | | ADDRESS | | | |
| RESIDENTIAL APPLIANCES | | | | | | | CITY | ** . | TEL. N | 0 |
| RANGEDRYERWTR. HTR | | | | | | | APPLICANT Pa | cific | Inst | allers |
| STA. COOKDISPF.A.U | | | | | | | ADDRESS 1917 | W. Ar | teis | a Blvd. |
| SPACE HTRAIR COND | | | | | | | CITY Garden | | TEL. N | |
| CLOTHES WASHDISHWASH | | | 1 | ea | | | LICENSE OR REG. NUMBER 211 | | | CLASS. |
| FANOT | HER | | | 1.00 | 1 | . 00 | I HERERY ACKNOWLEDGE THAT I HAVE DEAD THIS AFRICATION | | | |
| MOTORS, TRANSFORMERS RATING IND. HEATERS, ETC. SIZE & TYPE OVER TO | | | | | | AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING. | | | | |
| 0 – 1 | | | 1.00 | | | I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/O LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE O | | | | |
| 110 | | 1 – 10 | _ | 3.00 | | | CALIFORNIA OR THAT AM THE LEGAL TOWNER OF THE ABOVE PROPERTY. | | | ER OF THE ABOVE |
| 10 - 50 | | 10 - 50 | | 5.00 | | | | | | |
| 50 – 100 | | 50 - 100 | | 1 0.00 | | | DISTRICT NO. | | PROCES | SED BY |
| 100 - 500 | | | 15.00 | | | 12 | | | (1)000 | |
| SIGN, GAS TUBE, OR | SIGN AND | SIGN AND ONE CIRCUIT | | 5.00 | | | APPROVALS | DATE | | INSPECTOR'S SIGNATURE |
| MARQUEE | ADDITIONA | L CIRCUITS | | 1.00 | | | TEMP. POWER POLE | : | | |
| SERVICE NOT OVER 600 VOLTS OR 200 AMP | | | | 3.00 | | | UNDERSLAB WORK | | | • |
| SERVICEOVER | 600 VOLTS | OR 200 AMP | | 10.00 | | 1 . | ROUGH CONDUIT | | | |
| TEMP SERVICE, POLE, & APPURTENANCES | | | | 5.00 | | | WIRING | | | |
| TEMP LIGHT OR RECEPT. SYSTEM | | | | 3.00 | | | FIXTURES | | | |
| | | | | | | | POWER AUTHORIZED | | | |
| | | | | | | | UTILITY CO. NOTIFIED | | | |
| | | | | | | | FINAL | | | |
| PERMIT FEE (SUB TOTAL) | | | | | | | NOTES: | . , | | |
| PLAN CHECK FEE | | | | | | | | | | |
| PERMIT ISSUING FEE | | | | 3.00 | 3 | 00 | | | - | |
| TOTAL FEE | | | | | <u> </u> | 00 | | | | |
| PLAN C | HECK VA | LIDATION | | к. | M.O. | CASH | PERMIT VALID | ATION | ĆK. |) M.O. CASH |

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PLAN CHECK VALIDATION

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CASH

76A667 (CE-817) APPLICATION FOR PLUMBING PERMIT

BUILDING

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION MAKE CHECKS PAYABLE TO:

68F6

| MAKE CHECKS PAYABLE TO: | | | | | | Address 944 W. Rayland | | | | |
|---|------------------|--------------|---------|-----------|--------------------------------|---|--|--|--|--|
| HARVEY T. BRANDT, COUNTY ENGINEER | | | | | | 1.00 | | | | |
| | FOR APPLICANT TO | FILL IN (PRI | NT OR 1 | YPE) | | NEAREST TOTE | | | | |
| NUMBER | @ FEE | | | CROSS ST. | | | | | | |
| | WATER CLOSET | | | - | l | OWNER D. Sedmak | | | | |
| BATH TUB | | | 2.00 | | | MAIL ADDRESS 944 W. Rayland | | | | |
| SHOWER | | | 2.00 | | | CITY Torrande TEL. NO. none | | | | |
| LAVATORY | | 2.00 | | | CONTRACTOR Pacific Installers | | | | | |
| SINK | | 2.00 | | | ADDRESS 1917 W. Arteisa | | | | | |
| 1 ea DISHWASHER | | 2.00 | 2 | 00 | CITY Gardena TEL. NO. 327-8551 | | | | | |
| CLOTHES WASHER | | | 2.00 | | | STATE 211898 LIC | | | | |
| SWIMMING POOL RECEPTOR | | | 2.00 | | | LICENSE NO. CLASS DISTRICT NO GROUP! ZONE PROCESSED BY | | | | |
| LAWN SPRINKLER SYSTEM | | | 2.00 | | | DISTRICT NO. GROUP ZONE PROCESSED BY | | | | |
| WATER HEATER | | | 2.00 | | | INDUSTRIAL WASTE APPROVAL | | | | |
| GAS SYSTEM OUTLETS | | | 2.00 | | | INSPECTION RECORD | | | | |
| OUTLETS OVER 5 PER SYSTEM | | | .30 | | | | | | | |
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| | | | | | | CILIALO | | | | |
| | | | | | | | | | | |
| Plan check fee See Reverse | | | | | <u> </u> | | | | | |
| PLUMBING PERMIT ISSUING FEE \$ 3 00 | | | | | | | | | | |
| | | TOTAL FEE | | 5 | 00 | | | | | |
| Plan check applicant | | | | | | APPROVALS DATE INSPECTOR'S SIGNATUR | | | | |
| Name | | | | | | UNDER SLAB WORK | | | | |
| | | | | | | ROUGH PLUMBING | | | | |
| Address | | | | | | GAS PIPING | | | | |
| City Tel. No. | | | | | | GAS VENT | | | | |
| I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING. I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL TOWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED REGIDENTIAL PROPERTY. | | | | | | HOT WATER HEATER | | | | |
| | | | | | | PLUMBING FIXTURES | | | | |
| | | | | | | GAS TEST | | | | |
| | | | | | | UTILITY CO. NOTIFIED | | | | |
| RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY. | | | | | FINAL | | | | | |
| SIGNATURE OF PERMITTEE | | | | | | A | | | | |

PERMIT VALIDATION

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